NAME:

SUPPLEMENT TO THE APPLICATION FOR ELECTRICAL INSPECTOR II

Instructions: In order for us to better evaluate your qualifications for this class, please complete and attach this form to your application.

- Complete one form for each employment you worked inspecting and/or supervising of residential, commercial, or industrial electrical installation work including the responsibility for the inspection of workmanship and material.

All employers should be listed on the employment application as well. This form may be duplicated or you may use plain sheets of paper for additional information.		
Employer's Name:		
Employer's Address:		
Your Job Title:		
Dates of Employment: From (mm/yy): To (mm/yy):		
Number of Hours Worked Per Week:		
Name of Your Immediate Supervisor:		
Job Title of Your Immediate Supervisor:		
Please describe <u>in detail</u> the work experience you received from this employer b indicating the type of electrical projects you inspected and/or supervised; the the methods of testing electrical installations; types of tools, materials, and equipment you used; and how many hours you worked on those projects.		

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I hereby certify that all statements in this form are true and correct, to the best of my knowledge, and I agree and understand that any misstatements of material facts herein may cause forfeiture of all rights to any employment in the State of Hawaii civil service.

I further request and authorize the employer, its agent and/or contact person named herein to furnish verification of the statements made herein and/or employment information as requested by the Department of Personnel Services of the County of Maui.

I understand that failure to provide sufficient detailed information may result in my application being rejected. I also understand that I may not submit resumes in lieu of filling out the supplemental questionnaire.

Signature	Date
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